

**RECEIVED**
CENTRAL FAX CENTER**NOV 2 - 2007**

1301 W. 25th Street
Suite 408
Austin, Texas 78705
Tel. (512) 637-9225
Fax. (512) 371-9088

FAX COVER SHEET

TO:	Dung Chau Examiner	Fax No.:	571-273-8300
FROM:	Katharina Schuster	Docket No.	TROU1100-3
DATE:	November 2, 2007	Number of Pages (Including this form):	2

Please contact 512.637.9220 if there is a problem with this transmission.

Re: Application No. 10/802,178, Applicant Initiated Interview Request Form attached.

Thank you.

CONFIDENTIALITY NOTICE

This communication is ONLY for the person named above. Unless otherwise indicated, it contains information that is confidential, privileged or exempt from disclosure under applicable law. If you are not the person named above, or responsible for delivering it to that person, be aware that disclosure, copying, distribution or use of this communication is strictly PROHIBITED. If you have received it in error, or are uncertain as to its proper handling, please immediately notify us by telephone and mail the original to us at the above address. Thank you.

NOV 2 - 2007

PTOL-413A (10-07)
Approved for use through 10/31/2007. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE**Applicant Initiated Interview Request Form**Application No.: 10/802,178First Named Applicant: Clint MillerExaminer: Chan, Dung K.Art Unit: 2169Status of Application: Pending**Tentative Participants:**(1) Primary Examiner Leslie Wong(2) Examiner Dung Chau(3) Attorney Katharina Schuster(4) Patent Agent Kevin GustProposed Date of Interview: November 14, 2007Proposed Time: 4:30 p.m. EST**Type of Interview Requested:**(1) ☒ Telephonic(2) ☐ Personal(3) ☐ Video ConferenceExhibit To Be Shown or Demonstrated: ☐ YES☒ NO

If yes, provide brief description: _____

Issues to be Discussed

Issues (Rej., Obj., etc.)	Claims/ Fig. #s	Prior Art	Discussed	Agreed	Not Agreed
(1) <u>102 Rejection</u>	<u>Claim 1</u>	<u>Shen</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Continuation Sheet Attached					

Brief Description of Arguments to be Presented:

Applicant would like to point out elements not described by Shen and would welcome any claim amendment suggestions from the Examiner that would forward the prosecution.

An interview was conducted on the above-identified application on _____.

NOTE: This form should be completed by applicant and submitted to the examiner in advance of the interview (see MPEP § 713.01).

This application will not be delayed from issue because of applicant's failure to submit a written record of this interview. Therefore, applicant is advised to file a statement of the substance of this interview (37 CFR 1.133(b)) as soon as possible.

Katharina W. Schuster
Katharina W. Schuster/Applicant's Representative Signature
Reg. No. 50,000

Examiner/SPE Signature

Kevin A. Gust
Kevin A. Gust/Applicant's Representative Signature
Reg. No. 51,032

Examiner/SPE Signature

This collection of information is required by 37 CFR 1.133. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.